

## STAYING CONNECTED TRAINING GRANT TRAVEL SUPPORT DOCUMENT

TRAVELER'S NAME \_\_\_\_\_

TRAVEL PURPOSE \_\_\_\_\_

LIBRARY'S NAME \_\_\_\_\_

DATE	TIME	AM/ PM	DEPARTURE FROM	ARRIVAL AT	# OF MILES	MILES @ _____	REGISTRATION FEE*	LODGING*	AIR TRANS*	OTHER TRANS*	MEALS	MISC	TOTAL
SUBTOTALS													GRAND TOTAL

I hereby certify that the above expenses were actually incurred by me as necessary traveling expenses in the performance of my official duties.

TRAVELER: \_\_\_\_\_

Signature

LIBRARY APPROVAL: \_\_\_\_\_

Signature/Library Director

\*Receipts are required for all travel expenses reimbursable under Staying Connected, except mileage. Receipts must be legible.

\*\*Guidelines and instructions for completing this form are attached.